24 NOV 2014 Waterfront Meeting

			Minutes
MRD-SD	LT Lagrew	Welcome/Opening Remarks	5
NEPMU-5		Ebola Update	30
NEPMU-5		Donning/Doffing Lab	30
Fleet Mental Health	CDR Millegan	Sprint Team	10
Fleet Mental Health	CDR King-Hollis	Fleet Mental Health Updates	10
NTC Physicals Clinic		Overseas screening	5
MRD-SD	Dr. Lagrew	Medical Updates	10
NMCSD Pharmacy	LT Powell & LT Kasper	Polypharmacy/Deployment Rx Management Tools/Mail Order Rx changes	15
NEPMU-5	HM2 Grandberry & HM3 Bright	Pesticide Reporting	5
NTC-Sea Duty Clinic	LT Jing	Overseas Screening Updates	5

Medical Readiness Division

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San Diego, CA 92136

Fleet Mental Health

CDR Jeffrey Millegan, MC USN

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LTJG Sammons

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Education and Training Division
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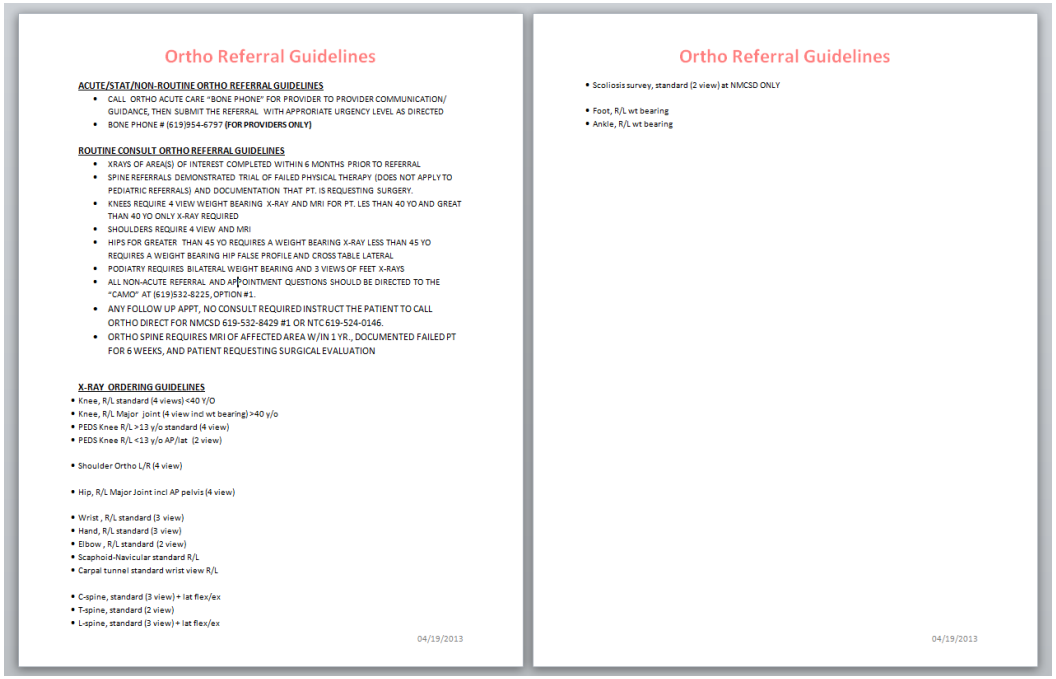
Managing Stress, Anxiety and Anxiety Disorders

Dr. Shiva Ghaed PhD, MPH

LT Banker

Naval Branch Health Clinic, NTC
2051 Cushing Road
San Diego, CA 92106-6000
(619) 524-0562
http://www.med.navy.mil/sites/nmcsd/Patients/Pages/SuitabilityScreeningCenter.aspx



Ortho Referral Guidelines

ACUTE/STAT/NON-ROUTINE ORTHO REFERRAL GUIDELINES

- CALL ORTHO ACUTE CARE "BONE PHONE" FOR PROVIDER TO PROVIDER COMMUNICATION/ GUIDANCE, THEN SUBMIT THE REFERRAL WITH APPRORIATE URGENCY LEVEL AS DIRECTED
- BONE PHONE # (619)954-6797 **(FOR PROVIDERS ONLY)**

ROUTINE CONSULT ORTHO REFERRAL GUIDELINES

- XRAYS OF AREA(S) OF INTEREST COMPLETED WITHIN 6 MONTHS PRIOR TO REFERRAL
- SPINE REFERRALS DEMONSTRATED TRIAL OF FAILED PHYSICAL THERAPY (DOES NOT APPLY TO PEDIATRIC REFERRALS) AND DOCUMENTATION THAT PT. IS REQUESTING SURGERY.
- KNEES REQUIRE 4 VIEW WEIGHT BEARING X-RAY AND MRI FOR PT. LES THAN 40 YO AND GREAT THAN 40 YO ONLY X-RAY REQUIRED
- SHOULDERS REQUIRE 4 VIEW AND MRI
- HIPS FOR GREATER THAN 45 YO REQUIRES A WEIGHT BEARING X-RAY LESS THAN 45 YO REQUIRES A WEIGHT BEARING HIP FALSE PROFILE AND CROSS TABLE LATERAL
- PODIATRY REQUIRES BILATERAL WEIGHT BEARING AND 3 VIEWS OF FEET X-RAYS
- ALL NON-ACUTE REFERRAL AND APPOINTMENT QUESTIONS SHOULD BE DIRECTED TO THE "CAMO" AT (619)532-8225, OPTION #1.
- ANY FOLLOW UP APPT, NO CONSULT REQUIRED INSTRUCT THE PATIENT TO CALL ORTHO DIRECT FOR NMCSD 619-532-8429 #1 OR NTC 619-524-0146.
- ORTHO SPINE REQUIRES MRI OF AFFECTED AREA W/IN 1 YR., DOCUMENTED FAILED PT FOR 6 WEEKS, AND PATIENT REQUESTING SURGICAL EVALUATION

X-RAY ORDERING GUIDELINES

- Knee, R/L standard (4 views) <40 Y/O
- Knee, R/L Major joint (4 view incl wt bearing) >40 y/o
- PEDS Knee R/L >13 y/o standard (4 view)
- PEDS Knee R/L <13 y/o AP/lat (2 view)

- Shoulder Ortho L/R (4 view)

- Hip, R/L Major Joint incl AP pelvis (4 view)

- Wrist , R/L standard (3 view)
- Hand, R/L standard (3 view)
- Elbow , R/L standard (2 view)
- Scaphoid-Navicular standard R/L
- Carpal tunnel standard wrist view R/L

- C-spine, standard (3 view) + lat flex/ex
- T-spine, standard (2 view)
- L-spine, standard (3 view) + lat flex/ex

04/19/2013

Ortho Referral Guidelines

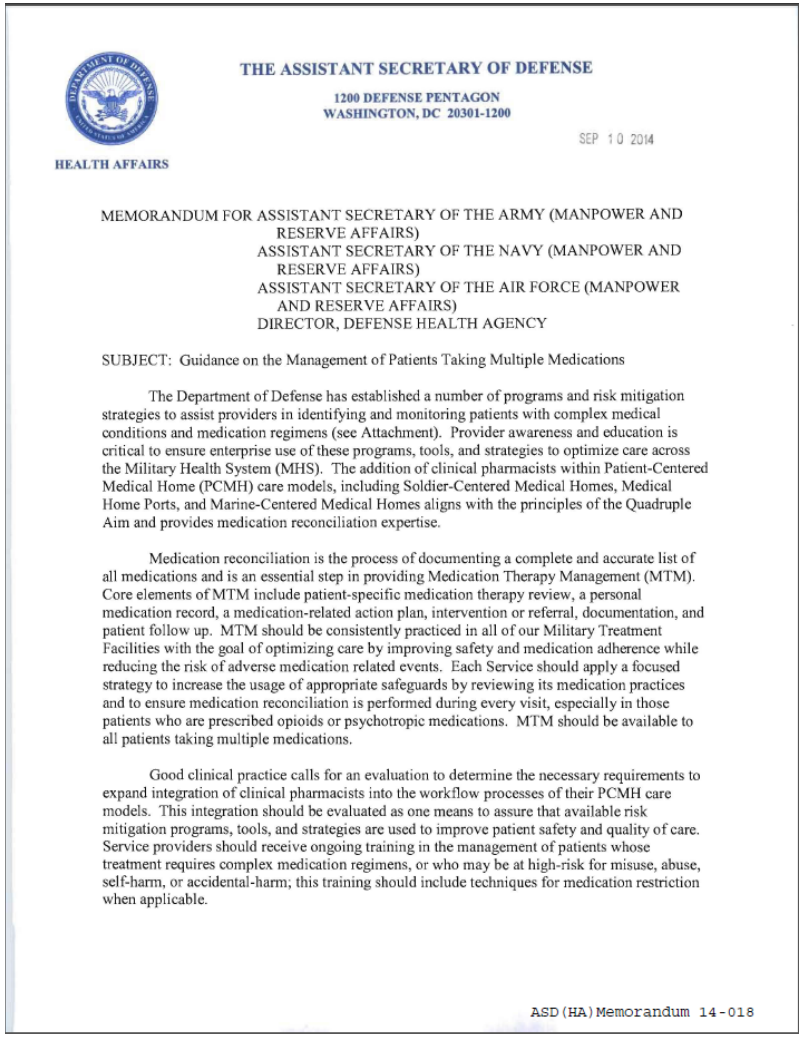
- Scoliosis survey, standard (2 view) at NMCSD ONLY

- Foot, R/L wt bearing
- Ankle, R/L wt bearing

04/19/2013

Ortho Referral Guidelines

Available at the NMCSD intranet homepage under “Clinical Tools” ✉ “Ortho Referral Guidelines”



THE ASSISTANT SECRETARY OF DEFENSE

1200 DEFENSE PENTAGON
WASHINGTON, DC 20301-1200

SEP 10 2014

HEALTH AFFAIRS

MEMORANDUM FOR ASSISTANT SECRETARY OF THE ARMY (MANPOWER AND RESERVE AFFAIRS)
ASSISTANT SECRETARY OF THE NAVY (MANPOWER AND RESERVE AFFAIRS)
ASSISTANT SECRETARY OF THE AIR FORCE (MANPOWER AND RESERVE AFFAIRS)
DIRECTOR, DEFENSE HEALTH AGENCY

SUBJECT: Guidance on the Management of Patients Taking Multiple Medications

The Department of Defense has established a number of programs and risk mitigation strategies to assist providers in identifying and monitoring patients with complex medical conditions and medication regimens (see Attachment). Provider awareness and education is critical to ensure enterprise use of these programs, tools, and strategies to optimize care across the Military Health System (MHS). The addition of clinical pharmacists within Patient-Centered Medical Home (PCMH) care models, including Soldier-Centered Medical Homes, Medical Home Ports, and Marine-Centered Medical Homes aligns with the principles of the Quadruple Aim and provides medication reconciliation expertise.

Medication reconciliation is the process of documenting a complete and accurate list of all medications and is an essential step in providing Medication Therapy Management (MTM). Core elements of MTM include patient-specific medication therapy review, a personal medication record, a medication-related action plan, intervention or referral, documentation, and patient follow up. MTM should be consistently practiced in all of our Military Treatment Facilities with the goal of optimizing care by improving safety and medication adherence while reducing the risk of adverse medication related events. Each Service should apply a focused strategy to increase the usage of appropriate safeguards by reviewing its medication practices and to ensure medication reconciliation is performed during every visit, especially in those patients who are prescribed opioids or psychotropic medications. MTM should be available to all patients taking multiple medications.

Good clinical practice calls for an evaluation to determine the necessary requirements to expand integration of clinical pharmacists into the workflow processes of their PCMH care models. This integration should be evaluated as one means to assure that available risk mitigation programs, tools, and strategies are used to improve patient safety and quality of care. Service providers should receive ongoing training in the management of patients whose treatment requires complex medication regimens, or who may be at high-risk for misuse, abuse, self-harm, or accidental-harm; this training should include techniques for medication restriction when applicable.

ASD(HA) Memorandum 14-018

Guidance on the Management of Patients Taking Multiple Medications

BLUF: Multiple resources are available to aid in management of patients taking multiple chronic medications

Tools available at

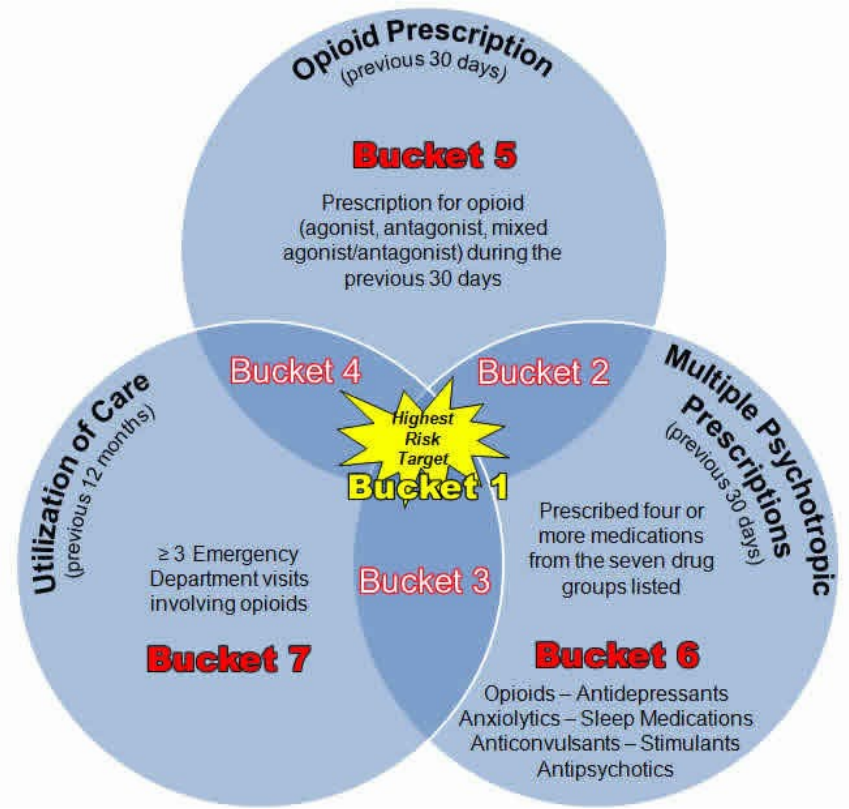
- -http://www.healthquality.va.gov
- -http://cme.usuhs.edu/

VA/DoD Clinical Practice Guidelines

U.S. Department of Veterans Affairs
SITE MAP [A-Z]
Search
Health
Benefits
Burials & Memorials
About VA
Resources
Media Room
Locations
Contact Us
VA » Health Care » VA/DoD Clinical Practice Guidelines
VA/DoD Clinical Practice Guidelines
VA/DOD Clinical Practice Guidelines
VA/DoD Clinical Practice Guidelines Home
Policy Guidance
Guidelines
More Health Care
QUICK LINKS
Hospital Locator
Zip Code
Go
Health Programs
Protect Your Health
A-Z Health Topics
Veterans Crisis Line
1-800-273-8255 PRESS 1
VA/DoD Clinical Practice Guidelines
Management of Diabetes Mellitus
Pregnancy Management
Management of Chronic Kidney Disease in Primary Care
Management of Opioid Therapy for Chronic Pain
Management of Major Depressive Disorder
Management of Concussion/ Mild Traumatic Brain Injury
About VA/DoD CPG
The Weight of the Nation
New Guidelines Available!
About VA/DoD CPG
The Evidence-Based Practice Work Group selects topics for implementation of evidence-based...
Learn more »
VHA, in collaborations with the Department of Defense (DoD) and other leading professional organizations, has been developing clinical practice guidelines since the early 1990s. In 2010 the Institute of Medicine identified VA/DoD as leaders in clinical practice guideline development.
Implementation of evidence-based clinical practice guidelines is one strategy VHA has embraced to improve care by reducing variation in practice and systematizing "best practices". Guidelines, as generic tools to improve the processes of care for patient cohorts, serve to reduce errors, and provide consistent quality of care and utilization of resources throughout the system. Guidelines also are cornerstones for accountability and facilitate learning and the conduct of research. The guidelines on this site are those endorsed by VHA's National Clinical Practice Guidelines Council.
Guidelines
What's New!
CPG resources
Guidelines
Clinical practice guidelines are increasingly being used in health

Medication Guidance

- Areas of emphasis
  - Multiple meds
  - Opioids
  - Mental Health prescriptions
- More to follow at the November meeting



Upcoming Meetings

- October
  - LARC
- November
  - Pain management for the GMO/IDC (speaker TBD)
- December
  - No scheduled meeting

CME Information

- Managing Stress, Anxiety and Anxiety Disorders
- CME Code (To claim credit online): 7257
- Closing Date (To claim credit online): 1 OCT 2014
- To complete CME go to NMCSD SEAT SharePoint site and click on MRDSD Waterfront Meeting September 2014 from drop down menu

http://nmcsd-as-spfe05/sites/dpe/setd/Lists/cmesurvey/Item/newifs.aspx?List=be0f840e%2D0489%2D4b5a%2Db8de%2D9c4cd1a323e5&Web=0901130e%2Dd444%2D45b8%2D8bc7%2D5b9ec10dca77